Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Florida Keys Community College Public Education Capital Outlay (PECO) Revision

2. Date of Submission: 02/06/2017

3. House Member Sponsor: Holly Raschein

Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

a. Has funding been provided in a previous state budget for this activity? Yes

If answer to 4a is ?NO? skip 4b and 4c and proceed to 4d

- b. What is the most recent fiscal year the project was funded? 2016-17
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- d. Complete the following Project Request Worksheet to develop your request (Note that column E will be the total of Recurring funds requested and Column F will be the total Nonrecurring funds requested, the sum of which is the Total of the Funds you are requesting in column G):

FY:	Input Prior Year Appropriation for this project for FY 2016-17 (If appropriated in 2016-17 enter the appropriated amount, even if vetoed.)		Develop New Funds Request for FY 2017-18 (Requests for additional RECURRING funds are prohibited. Any additional Nonrecurring funding requested to supplement recurring funds in the base will			
Column:	A	В	С	result in the base recurring amount being converted to Nonrecurring .) D F F		
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated (Recurring plus Nonrecurring: column A + column B)	Recurring Base Budget (Will equal non- vetoed amounts provided in Column A)	Additional Nonrecurring Request	TOTAL Nonrecurring Request (Will equal the amount from the Recurring base in Column D to be CONVERTED to Nonrecurring plus the Additional Nonrecurring Request in Column E. These funds will be appropriated non-recurring if funded in the House Budget or the Final Conference Report on the budget.)
Input Amounts:		4,500,000	4,500,000		3,500,000	3,500,000

5. Are funds for this issue requested in a state agency?s Legislative Budget Request submitted for FY 2017-18? Yes

5a. If yes, which state agency? Department of Education

5b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? For example, if the requested issue pertains to services provided to inmates at correctional facilities, the Department of Corrections would be the most appropriate state agency.

6. Requester: a. Name: <u>Dr. Jonathan Gueverra</u> b. Organization: <u>Florida Keys Community College</u> c. Email: <u>jonathan.gueverra@fkcc.edu</u> d. Phone #: (305)809-3204
 7. Contact for questions about specific technical or financial details about the project (Please retype if same as Requester): a. Name: <u>Dr. Jonathan Gueverra</u> b. Organization: <u>Florida Keys Community College</u> c. Email: <u>jonathan.gueverra@fkcc.edu</u> d. Phone #: (305)809-3204
8. If there is a registered lobbyist, fill out the lobbyist information below. a. Name: John Wayne b. Firm: Peebles & Smith, Inc. c. Email: john@peebles-smith.com d. Phone #: (850)681-7383
 9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact): a. Name: <u>Florida Keys Community College</u> b. County (County where funds are to be expended): <u>Monroe</u> c. Service Area (Counties being served by the service(s) provided with funding): <u>Monroe</u>
 10. What type of organization is the entity that will receive the funds? (Select one) O For Profit O Non Profit 501(c) (3) O Non Profit 501(c) (4) O Local Government O University or College O Other (Please describe)

11. What is the specific purpo	se or goal that will be	e achieved by th	he funds being	requested?
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Acquire land and facility to provide educational opportunities to students in the Upper Keys.

12. Provide specific details on how funds will be spent. (Select all that apply)

Spending Category	Description	Nonrecurring (Should equal 4d, Col. F) Enter ?0? if request is zero for the category
Administrative Costs:		
□a. Executive Director/Project Head Salary and Benefits		
□b. Other Salary and Benefits		
□c. Expense/Equipment/Travel/Supplies/Other		
□d. Consultants/Contracted Services/Study		
Operational Costs:		
☐e. Salaries and Benefits		
☐f. Expenses/Equipment/Travel/Supplies/Other		
☐g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
☑h. Construction/Renovation/Land/Planning Engineering	Acquire land and existing facility; small renovation needs.	3,500,000
TOTAL		3,500,000

^{13.} For the Fixed Capital Costs requested with this issue, what type of ownership will the facility be under when complete? (In Question 12, if ?h. Fixed Capital Outlay? was not selected, question 13 is not applicable)

OFor Profit

ONon Profit 501(c) (3) ONon Profit 501(c) (4) OLocal Government (e.g., police, fire or local government buildings, local roads, etc.) ⊙State agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation systemetc.) OOther (Please describe)	m,
14. Is the project request an information technology project? No	
15. Is there any documented show of support for the requested project in the community including public hearings, letters of support, major organizational backing, or other expressions of support? Yes	
15a. Please Describe: Public hearings Monroe County Commission, Public hearings Villages of Islamorada, Florida Keys Community College Board of Trustees.	
16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served? No	
17. Will the requested funds be used directly for services to citizens? Yes	
17a. Describe the target population to be served. Select all that apply to the target population: □Elderly persons □Persons with poor mental health □Persons with poor physical health □Jobless persons □Economically disadvantaged persons □At-risk youth □Homeless □Developmentally disabled □Physically disabled □Drug users (in health services) □Preschool students □Grade school students	

☐High school students
☑University/college students
☐Currently or formerly incarcerated persons
□Drug offenders (in criminal Justice)
□Victims of crime
□Other (Please describe)
17b. How many in the target population are expected to be served?
O< 25
O25-50
O51-100
⊙ 101-200
O201-400
O401-800
O>800

18. What benefits or outcomes will be realized by the expenditure of funds requested? (Select all that applies)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
□Improve physical health		
□Improve mental health		
□Enrich cultural experience		
□Improve agricultural production/promotion/education		
☑Improve quality of education	Provide enhanced educational opportunities for citizens/students in the Upper Keys.	Number of students served, number of classes taken.
□Enhance/preserve/improve environmental or fish and wildlife quality		
□Protect the general public from harm (environmental, criminal, etc.)		

☑Improve transportation conditions	Significant reduction in travel along main transportation corridor.	Number of students served, number of classes taken.
☑Increase or improve economic activity	Enhance labor force; provide labor for hospitality industry.	Number of graduates; number of full-time and part-time students seeking employment.
□Increase tourism		
□Create specific immediate job opportunities		
☑Enhance specific individual?s economic self sufficiency	Graduates more competitive in labor market.	Increase in annual earnings.
□Reduce recidivism		
□Reduce substance abuse		
□Divert from Criminal/Juvenile justice system		
□Improve wastewater management		
□Improve stormwater management		
□Improve groundwater quality		
□Improve drinking water quality		
□Improve surface water quality		
☑Other (Please describe): FKCC main campus is in Lower Keys (Key West) requiring FKCC to provide services to Upper/Middle Keys	Provide opportunities for students throughout the primary service area of the College (Monroe County).	Number of students served, number of classes taken.

19. Provide the total cost of the project for FY 2017-18 from all sources of funding (Enter ?0? if amount is zero):

Type of Funding	Amount	Percent of Total	Are the other sources of		
		(Automatically Calculates)	funds guaranteed in		
			writing?		

1. Amount Requested from the State in this Appropriations	3,500,000	77.8%	N/A
Project Request:			
2. Federal:	1,000,000	22.2%	No
3. State: (Excluding the requested Total Amount in #4d,	0	0.0%	No
Column F)			
4. Local:	0	0.0%	No
5. Other:	0	0.0%	No
TOTAL	4,500,000	100%	

20. Is this a multi-year project requiring funding from the state for more than one year? $\underline{\text{No}}$